

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X660

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

Establishm	~	, ,	Telephone Number 812 941 9647	Date of Inspection PERMIT # (mm/dd/yr)	
		* 37	B12 941 9647	2/6/2020 19-09	
1 1 m pen /2772					
Owner	Grafi	ine Rd New Albay, IN 47150	Purpose:	Follow-up Release Date	
	[Indiana]	\ LP	Routine	NO TODAY	
Owner's Ac	<u>, </u>		2. Follow-up	Summary of Violations:	
486 En	st Stop	18 Rd Greenwood, IN 46143	3. Complaint	Summary of Violations.	
Person in C		1	4. Pre-Operational	C_1 NC_4 R_	
Responsible	e Person's I	E-mail	5. Temporary	Menu Type (See back of page)	
			6. HACCP		
Certified F	ood Manag	er	7. Other (list)	1345	
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"					
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"					
Section#	C/NC	R Narrative		To Be Corrected By	
4/38	<u></u>	Observed (3) unlabeled chanica	I sprayers in office o	but Corneke	
297	NC	Observed produce debris /dirt in produce bag reels Today			
372	NC	Observed dampsto to be left open Today			
394	NC	Observed debris/feed arend sumpsker / week			
389	MC		of dairy/produce re	til Courted	
<u> </u>		Cordone roup years at the	17 400171711000		
				.1	
	FCHO recommended a thermometer at dairy refail side for easier visibility for employees as retail floor				
	ter easier risibility for employees on retail their				
			· · ·		
	1 -				
}					
Received by (name and title printed): Inspected by (name and title printed): A.). Ingram (EHS)					
Received by (signature): Inspected by (signature):					
me of Call					
cc:		Cc:		cc;	